

375 Jackson Street, Suite 220 Saint Paul, MN 55101-1806 Tel: 651-266-8989 | Fax: 651-266-9124 Visit our web site: www.stpaul.gov/dsi

FOLDER#	
(for office use only)	

Vacant Building \$5,000.00 Performance Deposit

Today's Date:																	
Vacant Building Addr	ress: _																
Depositor's Name:	lease pr	int cleaı	rly and le										_				
Depositor's Address:	(Street																
	(City, St	ate, Zip)														
Depositor's Daytime	Phone	hone Depositor's Fax Number: (Include Area Code)															
When your proje you.	ct is c	ompl	eted a	nd apı	proved	, your :	\$5,000	.00 per	forma	ance de	eposit,	plus in	erest	, will l	be re	efunc	led to
I understand that applicable (Categoricable (Categoricable) be issued. It may expeditiously as impact on the collaboration to authorization to applicable.	ory 3	Build ossib nore etion this p	ing), a ple to ; than of wo	\$5,00 get an 50% c ork. ty sha	0.00 pe addit comple	erform ional s ite or i	ance d ix (6) r f unfo	eposit nonth r eseen	(cash s to c conc	or bon omple t litions	d) mus te proj have l	t be m ect if v	ade b vork ignifi	efore is pro cant	a pe ocee sche	ermit ding	
Please indicate b	elow	the ac	ddress	your	refund	check	should	be se	nt to:								
Name:																	
Street Ad	ddress	s:															
Street Ad	ddress	s:															
City, Stat	te, Zip	:															
A 2.49% service fee will			all credit o providei	or debit co DSI uses	by cred ard transa to handle	ctions and	, comple will appe	ete the ear as a se	follow parate tr	ing info	on your c	ard statem	ent. This	: fee is cl	hargea	l by the	service
Signature of Cardho		•			rges):		Secu	ritv			Б	piration				1	1
Enter Account							Code	-			I	onth/Ye					